

Supplemental Application Data Sheet**Application Information**

Application number:: 10/006,780
Filing Date:: 11/30/01
Application Type:: Regular
Subject Matter:: Utility
Title:: NOVEL MOTOR PROTEIN OF P. FALCIPARUM
AND METHODS FOR ITS USE
Attorney Docket Number:: 020552-007200US
Request for Early Publication:: No
Request for Non-Publication:: No
Small Entity?:: Yes
Petition included?:: No
Secrecy Order in Parent Appl.: No

Applicant No. 1 Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Roman
Family Name:: Sakowicz
City of Residence:: Foster City
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1119 Nimitz Lane
City of Mailing Address:: Foster City
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94404

Applicant No. 2 Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Christophe
Family Name:: Beraud
City of Residence:: ~~San Francisco~~ Palm Springs
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: ~~761 Tehama Street~~ 649 North Farrell Drive
City of Mailing Address:: ~~San Francisco~~ Palm Springs
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: ~~94103~~ 92262

Applicant No. 3 Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jun
Family Name:: Guo
City of Residence:: Fremont
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 40326 San Sebastian Place
City of Mailing Address:: Fremont
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94539

Applicant No. 4 Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Family Name:: Freedman
City of Residence:: San Mateo
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1012 Shoreline Drive
City of Mailing Address:: San Mateo
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94404

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Assignee Information

Assignee Name:: Cytokinetics, Inc.
Street of mailing address:: 280 East Grand Avenue
City of mailing address:: South San Francisco
State or Province of mailing address:: CA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94080